

HUNTINGTON CITY
APPLICATION FOR BUSINESS LICENSE
PO BOX 126*HUNTINGTON UTAH 84528*435-687-2436*FAX 435-687-2267

Name of Business: Creative Curbing

Business Mailing Address:
P.O. Box 616
Huntington, Utah 84528

Business Street Address:
325 N. Main Street
Huntington, Utah 84528

Business Phone No. 435-609-0979

Fax No. _____

State Sales Tax # _____

Utah State License # (if applicable) _____ Expiration Date _____

Utah State Contractors License # _____ Classification(s) _____

Owner of Business: Jace Fausett Home Phone 435-609-0979

Owners Address: 325 N. Main Street Huntington

Applicant/Manager Name: Same Home Phone Same

Applicant/Manager Address: _____

Submit application allowing up to 30 days for processing.

Home or Premise Occupation applications must go before the Planning and Zoning Committee.

This application will be placed on the next council meeting agenda. Please attend to present you business for council approval.

This form is an application for a business license. The actual license will be issued only when this form is completed, submitted of payment, and meets all requirements. All information must be accurately completed or the issuance of a license will be delayed. It is a Class B Misdemeanor to own or operate a business in Huntington City without a business license.

Business License Renewals shall be due annually on the 1st of December each year. If the fee is not paid by January 10th, a 10% penalty will be assessed. If no payment is received by March 1st the business license will become null and void. A new application must then be resubmitted along with payment for all delinquent fees.

I, (We) Jace Fausett hereby agree to conduct said business strictly

in accordance with the laws and ordinances covering such business and swear under penalty of law the information contained herein is true.

Applicant Signature  Date 5-19-15

City Use Only:

License No. _____

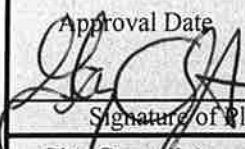
Date Issued _____

Amount Received \$ _____

Home or Premise Occupation put before the Planning and Zoning Committee

Approval Date 5-26-15

Disapproved _____

 zoning administrator
Signature of Planning & Zoning Chairperson

City Council Approval Date _____

Disapproved _____

Signature of Mayor _____

CLAY

650-1011

HUNTINGTON CITY
CONDITIONAL USE PERMIT APPLICATION

Send all completed and properly signed forms (including attachments as necessary) along with applicable fees to: Huntington City Planning Commission, P.O. Box 893, 20 South Main, Huntington, UT 84528. For questions call (435) 687-2436

Please check one.

- ☒ New Business (Complete boxes 1 through 13 on page 1, and all subsequent pages)
☐ New Construction/Development (Check all applicable boxes below and complete entire application)

Plan Phase:

- ☐ Concept
☐ Preliminary
☐ Final

Date of Planning Review: _____

PLEASE TYPE OR PRINT LEGIBLY.

Applicant Information

1. Applicant's Name: <u>Jace Fausett</u>		2. Title: <u>Owner</u>	
3. Applicant's Mailing Address: <u>P.O. Box 616</u>		4. Suite/Apt.No.: _____	
5. City: <u>Huntington</u>	6. State: <u>Utah</u>	7. Zip Code: <u>84528</u>	
8. County: <u>Emery</u>		9. Telephone: () Cell phone: <u>(435) 609-0979</u>	

Project Information

10. Name of Project (Business): <u>Creative Curbing</u>
11. Address of Proposed Project: <u>325 N. main street</u>
12. Zone District (see attached zoning map): _____

Nature of Proposed Work (Check all applicable items in boxes 13 through 16)

13. * <input type="checkbox"/> Sign <input type="checkbox"/> Commercial <input type="checkbox"/> Residential	14. <input type="checkbox"/> Zone Change <input type="checkbox"/> Storm Drainage <input type="checkbox"/> Street Work <input type="checkbox"/> Road Dedication <input type="checkbox"/> Water <input type="checkbox"/> Sewer	15. <input type="checkbox"/> Excavation <input type="checkbox"/> Fill Work <input type="checkbox"/> Building <input type="checkbox"/> Subdivision <input type="checkbox"/> Apartments <input type="checkbox"/> Electrical	16. <input type="checkbox"/> Industrial <input type="checkbox"/> Annexation <input type="checkbox"/> Flood Plain <input type="checkbox"/> Recreation <input type="checkbox"/> Street Opening <input type="checkbox"/> Demolition
--	---	--	---

17. Quarter Section(s): _____	18. Section(s): _____	19. Township(s): _____	20. Range(s) & Base: _____
-------------------------------	-----------------------	------------------------	----------------------------

21. Estimated Cost of Project: a) Site Work \$ _____ b) Buildings \$ _____ c) Other \$ _____ Total \$ _____	22. Electrical Load Sheet: (Attach preliminary and final to application)	23. Project Plans: <input type="checkbox"/> Plans Included <input type="checkbox"/> Attachments (Number)
--	--	--

24. Brief Description of Project:
 installing landscape curbing in Carbon/Emery
 country

25. Justification (Explain why this project is needed):

26. Names and Addresses of Adjoining Property Owners, Lessees, Etc.:

NAME	ADDRESS (City, ST, Zip)	TELEPHONE
1		() ()
2		() ()
3		() ()
27. Estimated Starting Date: / /	28. Estimated Completion Date: / /	29. Has CVSSD Sewer and Water Survey Been Submitted? Y N

Matthew Gaussett
 Signature of Property Owner

5-26-15
 Date

Please Print Name

Title

Office Use Only

Recommendation of Planning and Zoning Administrator (Community Director):

☒ Approve
☐ Decline

Comments:

Signature:

[Signature]
 Zoning Administrator

Date:

5-26-15

Requires:

- ☐ Building Permit
☐ Conditional Use Permit
☐ Code Amendment
☐ Board of Adjustments Variance
☐ Flood Plain Development Permit
☐ Other: _____